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|--------------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. DA | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/667,904 | 09/16/2003 | Kevin L. Corcoran | 021919-001010US | 8197 |

TITLE OF INVENTION: EMBOSSED SYSTEM TO BE USED WITH A DIE PRESS

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| | |
|--------------------------|--------------------|
| Jeanette Olivera | (Depositor's name) |
| <i>Jeanette Olivera</i> | (Signature) |
| <i>November 18, 2005</i> | (Date) |

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | | |
|---|--------------|---|-----------------|------------------|------------|--|--|
| nonprovisional | YES | \$700 | \$300 | \$1000 | 11/25/2005 | | |
| EXAMINER | | ART UNIT | | CLASS-SUBCLASS | | | |
| YAN, REN LUO | | 2854 | | 101-004000 | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | <i>Townsend and Townsend and Crew</i> 2 _____ 3 _____ | | | | | |

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ellison Educational Equipment, Inc.

Lake Forest, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
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Authorized Signature Raymond B. Hom

Date Nov 18, 2005

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Atty Docket No. 021919-001010US

PTO FAX NO.: 1-571-273-2885

ATTENTION: Examiner Ren Luo Yan

Group Art Unit 2854

**OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Ren Luo Yan**

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Kevin L. Corcoran, et al., Application No. 10/667,904, filed September 16, 2003 for EMBOSSING SYSTEM TO BE USED WITH A DIE PRESS are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Part B – Fee Transmittal (in duplicate)

Number of pages being transmitted, including this page: 3

Dated: November 18, 2005

Jeanette Olivera 
Jeanette Olivera

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